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DECLARATION FOR UTILITY OR				Attorney Do	cket Number	0551P10L	JS01			
		DES		TILLIT OR	First Name	d Inventor	A. Ramas	wamy et	al.	
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amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.										
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[Page 1 of 2]

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NAME OF SOLE OR FIRST IN	VENTOR:		ПАр	etition	has t	een filed	for thi	s unsior	ned inventor
Given Name (first and middle [if any])					Family N			
Arvind		RAMASWAMY							
Inventor's Signature	•						•	•	Date
Residence: City	State			Cour	ntry		-	Citizer	L aship
Ottawa	Ontario			CANA	•			Canadia	•
Mailing Address 1380 Prince of Whales Drive, Apart	ment 1008								
City	State				ZIP			-	Country
Ottawa	Ontario				кас	3N5			CANADA
NAME OF SECOND INVENTO	R:			T	A	petition h	as bee	ກ filed f	or this unsigned inventor
Given Name (first and middle)	[if any])				1	amily Na	me or	Suman	ne
David					s	CHENKE	L		•
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Residence: City	State			Cour	ntry			Citizer	nship
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Additional inventors or a legal re	presentative are bei	ng named on	the 1s	upplem	ental sh	neet(s) PTC	/SB/02A	or 02LR a	attached hereto.

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DECLARATION	required to re	d to respond to a collection of information unless it contains a valid OMB control number. ADDITIONAL INVENTOR(S) Supplemental Sheet					
		 		Page	1 of _1		
Name of Additional Joint Inventor, if any:	☐ A petition	has been filed for this t	unsigned in	ventor			
Given Name (first and middle (if any)		Family Name or	Sumame				
Michael		SLAVITCH		-			
Inventor's Signature				Date			
Ottawa Residence: City	Ontario State	CAN/ Cou	ADA (Canadian Citizenship			
62 Renfrew Avenue Mailing Address							
62 Renfrew Avenue Mailing Address							
Ottawa City	Ontario State		K1S 1Z5 Zip	CANADA			
Name of Additional Joint Inventor, if any:		A petition	has been filed for this u				
Given Name (first and middle (if any)		Family Name or Surname					
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Residence: City	State		Country		Citizenship		
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Application Number	
Filing Date	
First Named Inventor	Arvind RAMASWAMY
Title	Method And System Console
Art Unit	
Examiner Name	
Attorney Docket Number	0551P10US01

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SIGNAT	URE of Applicant o	r Assignee of Record (if assi	ignee, put name,	title and cor	mpany name in	the "Nam	ne" space below)	
Name	Arvind RAMASWAN	ΛΥ	, "					
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Application Number	
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First Named Inventor	Arvind RAMASWAMY
Title	Method And System Console
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Examiner Name	
Attorney Docket Number	0551P10US01

			
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Assignee of record of the entire interest. See 37 CFF	271		
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SIGNATURE of Applicant or Assignee of Record (if ass	ignee, put name, title and co	empany name in the "Name" space below)	
Name David SCHENKEL			
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Name	Michael SLAVITCH						
Signature			•				
Date			,	Telephone			
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